

# CLAIMS ONLY

Application Number

10/59/9710

Filing Date

Applicant(s)

CLAIMS	AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend
1				
2				
3				
4				
5				
6				
7				
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45				
46				
47				
48				
49				
50				
Total				
Indep	2			
Total	14			
Depend				
Total	16			
Claims				

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
53						
54						
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Total						
Indep						
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Claims						